ISSUE SLIP STAPLE AREA (for additiona cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION				
O.I.P.E. CLASSIFIER		4/2	2/2 /2/	
FORMALITY REVIEW	Ma	1-20	707	
RESPONSE FORMALITY REVIEW		1127	11/20101	
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INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here

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